

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEES DETERMINATION        | MW       | 67824  | 3/4/00  |
| O.I.P.E. CLASSIFIER       | JMD      | 108231 | 5-4-00  |
| FORMALITY REVIEW          | JMD      | 108231 | 5-4-00  |
| RESPONSE FORMALITY REVIEW | JMD      | 108231 | 5-26-00 |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim | Date                    |
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If more than 150 claims or 10 actions  
staple additional sheet here

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